



Montclair Surgical Associates, PA

New Patient Registration Form

Name _____ Date of Birth _____ Age _____

Street Address _____ Home Phone _____

Town | State | Zip _____

Occupation _____ Employer _____

Social Security # _____ Business Phone _____

Primary Insurance Co. | HMO _____ ID # _____

Secondary Insurance Co. | HMO _____ ID # _____

Marital Status _____ Emergency Contact Person | Phone _____

Primary Physician _____ Referring Physician _____

Medicare Patients Only:

"I request that payment of authorized Medicare benefits be made either to me or on my behalf to Montclair Surgical Associates PA (MSA) for any services rendered to me by the physicians of MSA. I authorize any holder of medical information about me to release to the Health Care Financing administration (HCFA) and its agents any information needed to determine these benefits or the benefits payable for related services."

Signature _____ Date _____

Non- Medicare Patients:

"I request that payment of authorized benefits be made either to me or on my behalf to Montclair Surgical Associates PA (MSA) for any services rendered to me by the physicians of MSA. I authorize any holder of medical information about me to release to my insurer and its agents any information needed to determine these benefits or the benefits payable for related services."

Signature _____ Date _____

Surgical Assistant Policy:

Only the operation surgeon can decide if an assistant surgeon is required for the proper conduct of an operation. Some insurance plans do not cover the services of an assistant surgeon, even when requested by the operating surgeon with the patient's interests and safety in mind. Please be advised that in such cases you will be billed directly for the assistant's services. The usual and customary fee for the assistant is 25% of the surgeons fee. We are happy to discuss this policy with you if there are any questions. Your signature affirms that you have read this policy.

Signature _____ Date _____

Joseph Barbalinardo, MD FACS
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Silvia Fresco, MD FACS
George Saj MD FACS

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